

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL KEN PAXTON FOR SENATE					
ADDRESS (number and street) 110 NORTH AKARD ST PMB #40					
CITY DALLAS		STATE TX		ZIP CODE 75201	
2. NAME OF CANDIDATE PAXTON, WARREN, KENNETH, , JR.			3. OFFICE SOUGHT (State and District) Senate TX 00		4. FEC IDENTIFICATION NUMBER C00901918
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____					
A. FULL NAME DETERS, JUDITH, M., , MAILING ADDRESS 249 NORTH ST CITY BAILEYVILLE STATE KS ZIP CODE 66404-9419				Name of Employer RETIRED Date (month, day, year) 02/19/2026 Amount 1000.00 Transaction ID : TX49528 Occupation RETIRED	
B. FULL NAME LYDA, EDWIN, LEE, MR., MAILING ADDRESS P.O. BOX 8488 CITY THE WOODLANDS STATE TX ZIP CODE 77387-8488				Name of Employer SELF-EMPLOYED Date (month, day, year) 02/19/2026 Amount 1000.00 Transaction ID : TX49527 Occupation CONTRACTOR	
C. FULL NAME MAPLE, RALPH, EARL, MR., MAILING ADDRESS 5215 VALLEY BLUFF LN CITY KATY STATE TX ZIP CODE 77494-2966				Name of Employer RETIRED Date (month, day, year) 02/19/2026 Amount 1000.00 Transaction ID : TX49530 Occupation RETIRED	
D. FULL NAME MIDGLEY, JAMES, E., DR., MAILING ADDRESS 2608 STONE CREEK DR. CITY PLANO STATE TX ZIP CODE 75075-2910				Name of Employer RETIRED Date (month, day, year) 02/19/2026 Amount 1000.00 Transaction ID : TX49529 Occupation RETIRED	
E. FULL NAME NUNN, JANET, L., , MAILING ADDRESS 1911 SWEETWATER RD CITY PORT LAVACA STATE TX ZIP CODE 77979-6369				Name of Employer RETIRED Date (month, day, year) 02/19/2026 Amount 1000.00 Transaction ID : TX49526 Occupation RETIRED	
SIGNATURE (optional) PLISHKA, JOHN, , ,				DATE 02/20/2026	
For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov					

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE SMITH, ANDREW, L., , 3213 SAN SEBASTIAN DR. CARROLLTON TX 75006-5220	Name of Employer RETIRED Transaction ID : TX49531 Occupation RETIRED	Date (month, day, year) 02/19/2026	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE BECK, THOMAS, , , 139 BECK LN BASTROP TX 78602-3208	Name of Employer RETIRED Transaction ID : TX49550 Occupation RETIRED	Date (month, day, year) 02/19/2026	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE BOBADILLA, KARI, , , 5353 MEMORIAL DR 2027 HOUSTON TX 77007-8267	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Transaction ID : TX50215 Occupation INFORMATION REQUESTED PER BI	Date (month, day, year) 02/19/2026	Amount 7000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE FORBES, SEAN, , , 2917 WATERBANK CV AUSTIN TX 78746-4136	Name of Employer SC FORBES VENTURES VII Transaction ID : TX50299 Occupation CHAIRMAN	Date (month, day, year) 02/19/2026	Amount 5900.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE MCFADDEN, CAROL, , , 2929 WESLAYAN HOUSTON TX 77027-	Name of Employer SELF Transaction ID : TX50276 Occupation MANUFACTURING	Date (month, day, year) 02/19/2026	Amount 7000.00

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE STORM, TUYET, , , 5411 FLOYD ST. UNIT 1 HOUSTON TX 77007-		Name of Employer MJS PROFESSIONAL CONSULTING SERVICES Transaction ID : TX50278 Occupation CREDIT CONTRACTS MANAGER	
		Date (month, day, year) 02/19/2026	
		Amount 7000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	